

# Child and Adult Care Food Program (CACFP)

## CIVIL RIGHTS POTENTIAL BENEFICIARY DATA DETERMINATION FORM

### INSTRUCTIONS

The following potential beneficiary data must be collected **annually**. List the primary towns to be served by the institution with an estimate of the racial/ethnic make-up of the population to be served. The Connecticut State Department of Education (CSDE)'s school enrollment data assists with the racial or ethnic breakdown of each service area. The CACFP sponsor must retain all program records on file for **three years** after the submission date of the final claim for reimbursement for the fiscal year to which they pertain; or if an audit is outstanding, until the audit is closed. Access to this data must be limited to authorized personnel. Collection of this information promulgates a policy as contained in [FNS Instruction 113-1](#) issued November 18, 2005.

Center/Provider Name: \_\_\_\_\_

ESTIMATED NUMBER IN ETHNIC/RACIAL CATEGORY *							
Town (Indicate if statewide)	ETHNICITY		RACE				
	Hispanic or Latino	Not Hispanic or Latino **	American Indian or Alaskan Native	Asian	Black or African American	White	Native Hawaiian or Other Pacific Islander
<b>TOTAL</b>							

\* Indicate **document source** from which this information is obtained: \_\_\_\_\_

\*\* This column equals the **total** of the races on this line (American Indian + Asian + Black + White + Native Hawaiian).

\_\_\_\_\_  
Sponsor Representative's Signature

\_\_\_\_\_  
Date

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.)

If you wish to file a Civil Rights program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](#) (PDF), found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov).

Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish).

USDA is an equal opportunity provider and employer.

*This document is available at [www.sde.ct.gov/sde/lib/sde/pdf/deps/nutrition/cacfp/cr/crpotbencacfp.pdf](http://www.sde.ct.gov/sde/lib/sde/pdf/deps/nutrition/cacfp/cr/crpotbencacfp.pdf).*